

**GCT Survivor Sisters
collaboration with Hudson
Institute of Research.**

WHERE IT ALL BEGAN!

GCT Survey Form in FB group – completed by 744 women



Admins: Kim Eroh, Kaye Ackerman, Sue Rogers, Linda Langdale, Tasha Armour.

Hudson Institute of Medical Research, Melbourne, Australia



Dr Simon Chu, Maria Alexiadis, Prof Peter Fuller and Vicki White



Medical Research Future Fund (MRFF) 5 year funding grant

The 5 Themes

- 1. Use the GCT Survivor Sisters RWD to identify gaps in patient information, clinical care, health services and support;
- 2. Identify genomic mutations that lead to the development of the distinct adult and juvenile forms of GCT;
- 3. Characterise the molecular pathogenesis of GCT to inform personalised therapeutics;
- 4. Establish a cost-effective, highly specific and sensitive bioanalytical diagnostic assay for inhibins, a marker for GCT; and
- 5. Test novel combination drug therapies, that specifically target GCT pathogenic signalling pathways

Theme 1 – The Real World Data (RWD)



The published article:

How social media can help to understand treatment experiences of survivors of rare cancers: findings from the Granulosa Cell Tumour (GCT) Survivor Sisters Facebook Group

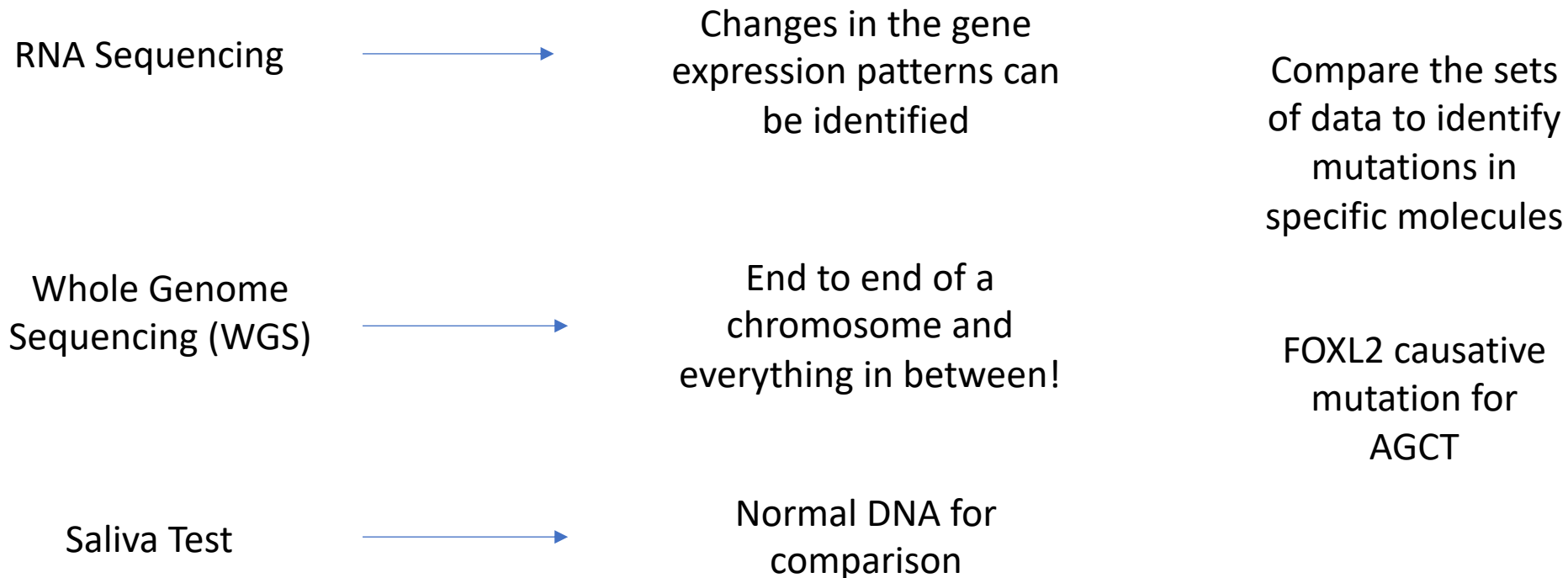
Running title: Consumer experiences for GCT cancer



Theme 1 and a half! – Radiotherapy Survey

Watch this space – another opportunity to investigate the statistics and outcomes of radiotherapy treatments

Themes 2 & 3 – Identifying mutations and molecular pathways of GCT

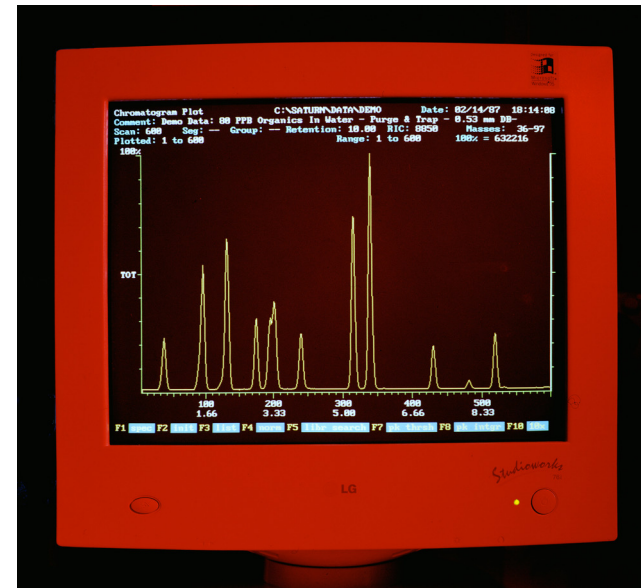


Theme 4 – Diagnostic assays for inhibin testing



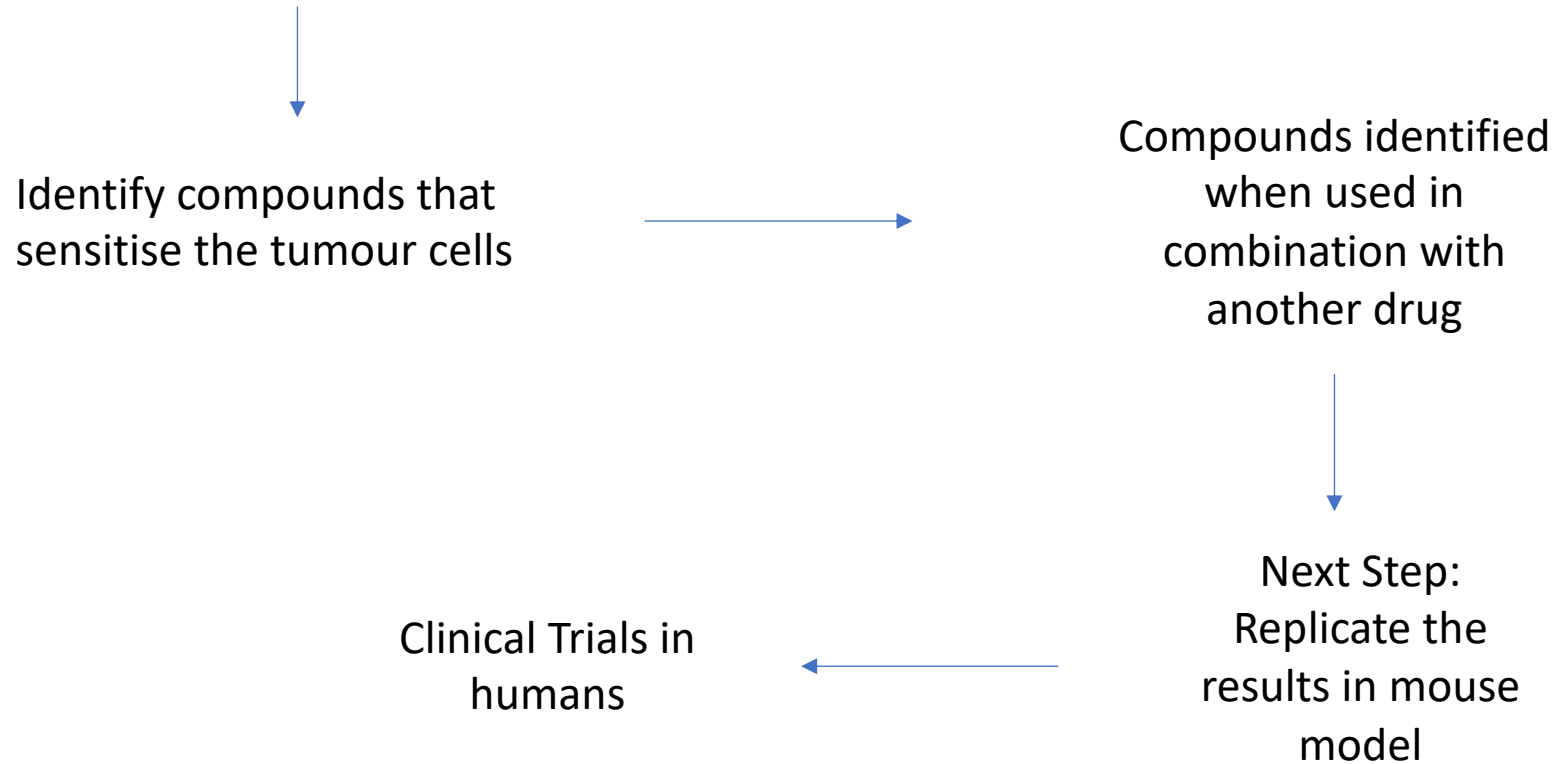
ELISA ASSAY
METHODS

MASS SPECTROMETRY
TECHNOLOGY



Theme 5 – Testing novel combination drug therapies

Tested so far: 3,500 known FDA approved drugs



Conclusion

- MFRR funding for 5 years – 3 years to go
- Support from GCTRF and ROC Inc (Rare Ovarian Cancer Inc)
- Step 1 completed successfully with added bonus of step 1 ½
- We need more fresh and stored tumour tissue donations, especially JGCT

- Thanks from Simon and Maria – looking forward to our continued collaboration